




<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. <b>U2054.0143/P143</b>																									
		First Inventor <b>Kenichi Ariga</b>																									
		Title <b>PORTABLE TELEPHONE SYSTEM AND COMMUNICATION CONTROL METHOD FOR PORTABLE TELEPHONE SET IN A</b>																									
		Express Mail Label No. _____																									
<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																									
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)																									
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.																											
3. <input checked="" type="checkbox"/> Specification [Total Pages <b>22</b> ] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>		8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Form (CRF)</li><li>b. Specification Sequence Listing on:<ul style="list-style-type: none"><li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li><li>ii. <input type="checkbox"/> Paper</li></ul></li><li>c. <input type="checkbox"/> Statements verifying identity of above copies</li></ul>																									
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>6</b> ]																											
		<b>ACCOMPANYING APPLICATIONS PARTS</b>																									
5. Oath or Declaration [Total Sheets <b>1</b> ] <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Newly executed (original or copy)</li><li>b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small><ul style="list-style-type: none"><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></li></ul></li></ul>		9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))																									
				10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <small>(when there is an assignee)</small> <input type="checkbox"/> Power of Attorney																							
11. <input type="checkbox"/> English Translation Document (if applicable)																											
		12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations																									
13. <input checked="" type="checkbox"/> Preliminary Amendment																											
		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>																									
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>																											
		16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.																									
17. <input type="checkbox"/> Other: _____																											
		18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: <b>09/131,571</b> <small>Prior application information: Examiner <b>S.Trinh</b> Art Unit: <b>2685</b></small> <b>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</b>																									
<b>19. CORRESPONDENCE ADDRESS</b>																											
<input type="checkbox"/> Customer Number: _____ OR <input checked="" type="checkbox"/> Correspondence address below		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td colspan="4">Name <b>DICKSTEIN SHAPIRO MORIN &amp; OSHINSKY LLP Steven I. Weisburd</b></td></tr><tr><td colspan="4">Address <b>1177 Avenue of the Americas 41st Floor</b></td></tr><tr><td>City <b>New York</b></td><td>State <b>NY</b></td><td>Zip Code <b>10036-2714</b></td><td></td></tr><tr><td>Country <b>US</b></td><td>Telephone <b>(212) 835-1400</b></td><td>Fax <b>(212) 997-9880</b></td><td></td></tr><tr><td colspan="2">Name (Print/Type) <b>Steven I. Weisburd</b></td><td colspan="2">Registration No. (Attorney/Agent) <b>27,409</b></td></tr><tr><td colspan="2">Signature </td><td colspan="2">Date <b>August 12, 2003</b></td></tr></table>		Name <b>DICKSTEIN SHAPIRO MORIN &amp; OSHINSKY LLP Steven I. Weisburd</b>				Address <b>1177 Avenue of the Americas 41st Floor</b>				City <b>New York</b>	State <b>NY</b>	Zip Code <b>10036-2714</b>		Country <b>US</b>	Telephone <b>(212) 835-1400</b>	Fax <b>(212) 997-9880</b>		Name (Print/Type) <b>Steven I. Weisburd</b>		Registration No. (Attorney/Agent) <b>27,409</b>		Signature 		Date <b>August 12, 2003</b>	
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18334 U.S. PTO  
08/12/03

PTO/SB/17 (05-03)  
Approved for use through 04/30/2003. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
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FEE TRANSMITTAL for FY 2003		Complete if Known	
Effective 01/01/2003, Patent fees are subject to annual revision.		Application Number	Not Yet Assigned
		Filing Date	Currently Herewith
		First Named Inventor	Kenichi Ariga
		Examiner Name	S. Trinh
		Art Unit	2685
		Attorney Docket No.	U2054.0143/P143
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$)		918.00	

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																																		
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">50-2215</span> Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">Dickstein Shapiro Morin &amp; Oshinsky LLP</span> The Director is hereby authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	<b>3. ADDITIONAL FEES</b> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for ex parte reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1,970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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1203	280	2203	140	Multiple dependent claim, if not paid																																																																																																																																																																															
1204	84	2204	42	** Reissue independent claims over original patent																																																																																																																																																																															
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent																																																																																																																																																																															
<b>SUBTOTAL (2)</b>				(\$)	168.00																																																																																																																																																																														
**or number previously paid, if greater; For Reissues, see above		*Reduced by Basic Filing Fee Paid																																																																																																																																																																																	
		<b>SUBTOTAL (3)</b> (\$) 918.00																																																																																																																																																																																	

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Steven I. Weisburd	Registration No. (Attorney/Agent)	27,409
Signature		Telephone	(212) 896-5470
		Date	August 12, 2003